

## THE

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### CASE OF EXCISION OF A PORTION OF THE LOWER JAW, FOR CARIES.

BY A. B. SHIPMAN, M.D.

[Communicated for the Boston Medical and Surgical Journal.]

O. Gross, æt. 20, of Marathon, Cortland Co., N. Y., received a blow under the chin in February last. Pain, swelling and soreness followed at the time, but subsided in a few days in a great measure; still an uneasiness and tenderness of the teeth in front remained, and his general health became somewhat affected. In August following, an increase in the soreness and swelling took place, with constitutional excitement, which was subdued in some measure by his physician, Dr. L. Kelly. Soon after this, his front teeth became very loose, and great swelling in front of the chin and sides of face took place; suppuration followed, and sinuses formed on the chin and inside of lower lip, which discharged a large quantity of sanious fluid. His general health became greatly impaired—fever and loss of appetite taking place.

At this time I was consulted, and visited the patient. On examination, found the following state of things. Great swelling of the lower part of face, especially in front of the chin; the skin felt hard and brawny, and was thickened up and nearly destitute of sensibility. The swelling extended as far back as the angles of the jaw, and on the sides of the face as high as the malar bones. The four front incisors were very loose, the gums spongy and bleeding, while the two next teeth on each side of the jaw were somewhat loose and tender. Several sinuses were discharging pus freely around the teeth, both inside and outside of them; and on examination with a probe, carious bone was felt over a large extent of the chin. His breath was horribly offensive, his countenance was bloated, cadaverous, and unhealthy. A violent pain in the head was almost constantly present, while constitutional irritation had reduced his strength to that degree that he was confined to his room. It was evident that caries of the lower jaw was the disease under which he was laboring; and the question arose, whether nature would repair the mischief, or whether the caries would extend to every portion of the jaw, and the constitutional disturbance in time wear him out. The next question which arose was, how extensive was the caries; and if an

operation was to be performed, how much of the bone was to be removed? The patient was firm in his desire for some kind of an operation for his relief. About the middle of September, in consultation with Dr. Robinson (Dr. Kelly being absent), an operation was decided on, of this description:—to make incisions from the angles of the mouth to the base of the jaw, dissecting the lower lip from the bone, leaving the whole of the front of the jaw bare, and then to remove so much of the bone as the nature of the disease required. The patient was prepared by giving him a full dose of morphia (ether or chloroform he refused); and being then seated in an arm chair, I commenced by making the incision as before mentioned. The soft parts were dissected off from the bone, and turned down beneath the chin. The bone was found carious, rough, and filled with holes, from which fungous granulations sprouted. Nine of the teeth, which were very loose, were next extracted. Hey's saw was next applied to the jaw opposite the second molar tooth, on the right side, and the bone nearly sawn through; it was then applied to the other side, nearly in the same place as on the opposite. The bone between the two places was clipped off with cutting forceps, cutting pliers, strong knives and scissors, until more than seven eighths of it was removed, when the remaining portion was found sound and free from sloughing or disease of any kind. The bone where it was sawn at each side was found perfectly free from caries or disease, and the bridge of bone left kept the portions on each side in their relative positions—a most desirable state of things, when attainable. The operation was rather tedious, occupying one hour and five minutes in its performance; but the patient bore it without a groan or other manifestation of pain. The flap was brought up, and several sutures applied, and supported by adhesive plaster. It was dressed in seven days for the first time, when it was found nearly united by the first intention. Three weeks from the date of the operation he visited me, a distance of sixteen miles. The parts perfectly sound, the face free from swelling, the bone and soft parts perfectly adherent, and no appearance of any disease about the seat of the former affection.

I have seldom performed an operation where the result was more satisfactory, than in the one just detailed. Yet it was undertaken with great reluctance, from a fear that the disease extended over nearly the whole extent of the bone, and that a portion might be left which would defeat the whole proceeding. Operations on carious bones are unpleasant performances, as a general thing; yet there is nothing from which we may derive more benefit than at times from them. Some years ago a lady brought me her daughter, about nine years of age, with wry neck. On inquiry, I ascertained that she had been in this state since she was 5 years old; that it followed scarlatina, from which she barely recovered. Necrosis of the lower jaw followed, sinuses formed, and the wry neck was the result. When I saw her, several openings existed in the cheek and side of the neck, which was affected, and a foetid sanies was continually flowing from the mouth. The probe detected rough bone, which was partially loose. An incision was made at the base of the

jaw, down to the bone, and with a strong pair of forceps I removed nearly the whole of one side of the lower jaw, which had remained there dead, and as a foreign body, for more than three years. It is unnecessary to say that the head assumed its erect attitude in a few days, and she got entirely well and has since remained so.

In the summer of 1847, a young gentleman from De Ruyter, Madison Co., came to me for advice, in relation to his hand. Six months previously, he was wounded over the metacarpal bone of the fore-finger of the right hand, with a hot iron in a blacksmith's shop. Inflammation, pain and great swelling followed. Suppuration finally took place, but without any relief. The bones became carious, he lost the use of his hand, and his general health, which, before the accident, was good, now became greatly impaired. He had sought much advice, but the most of it was for him to wait until nature should accomplish the cure. When I saw him, the probe detected the whole of the metacarpal bone of the fore-finger diseased, and a portion of the second and third fingers. The hand was as thick as two hands. The fingers, which were extended, could not be flexed in the least; they were, therefore, perfectly useless, as the thumb and fore-finger could not be made to touch each other. The hand itself was also useless, and there was no prospect of its being any better, but a fear that the caries would extend to the carpus, and loss of the hand and wrist by amputation be the only cure. Under these circumstances, I advised the removal of the carious portions, by an operation. To this he assented. I made an incision over the metacarpal bone of the fore-finger, and proceeded with it through its whole extent. I then carried it across to the same bone of the ring finger, cutting the skin and tendons down to the heads of the bones, dissecting up the flap and turning it down to the joints of the finger. This exposed the diseased bones, three in number. I removed the whole of the first two thirds of the second, and about one half of the third, with cutting forceps and strong scissors. The operation was painful and tedious, but after it was finished the flap was accurately laid down and secured by sutures and adhesive straps. Much of it united by the first intention, and the swelling and thickening of the parts subsided in a short time. The use of his hand returned in a great degree within six months after, and he has now a good and useful hand, contrary to the expectation of almost all his friends. I have many more cases of a similar description, but time forbids their detail in this communication.

*Cortlandville, N. Y., Nov. 10, 1848.*

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#### THE ASIATIC CHOLERA TRACEABLE TO CERTAIN ELECTRIC INFLUENCES.

[Communicated for the Boston Medical and Surgical Journal.]

THE startling admonitions which every arrival from Europe conveys to us of the approach of the most terrible pestilence of modern times—the Asiatic cholera—have naturally attracted the attention of physicians

and the public in general to its cause, nature and treatment. When it first visited these shores, its onslaught was of such sudden and appalling violence that professional and non-professional men seemed to be alike stunned, and rendered incapable of investigating it with any degree of care or success. The interval which has since elapsed, has not been unimproved by medical observers; and a large and valuable collection of facts, with regard to this disease, has been accumulated. We are thus provided, to a considerable extent, with the means of substituting for mere theory, the sober deductions of reason. I have myself devoted some time and labor to the collection of facts on this subject, and the result of my investigations has forced upon me, a theory, which I am at length encouraged to present to you for the attention and consideration of such of my professional brethren as have more leisure and more favorable opportunities, than I can command, for the prosecution of this most important inquiry. Merely premising that my theory of the origin and nature of Asiatic cholera was suggested and enforced by the facts which presented themselves, as I proceeded in my investigations, and that I did not set out with it, seeking only for facts to sustain a pre-conceived opinion, I shall at once give you, as succinctly as possible, the views which I entertain of this disease, and the grounds on which they are supported.

The dreadful influence that this mysterious agent, as an epidemic in the form of malignant cholera, has produced upon the human family, and its great fatality, carrying off, in thirty years, in numbers more than the population of the United States, need not be dwelt upon here. The cholera had been generally known in India previous to 1817, as occurring sporadically and in the most aggravated and malignant form of "cholera morbus," when it burst forth and spread its desolating fury, until it had made the circuit of the world. No sanitary precaution, whether by municipal laws, quarantines or military cordons, has ever been for one instant able to stay its onward course. Reason is beginning to give way to the *non-contagiousness* of its character, but still is medical as well as non-medical science abroad, and at a loss to account for the singular and irresistible waywardness of a disease which has alike defied them to arrest its progress or successfully treat it. It has been suggested that atmospheric influences superinduce and propagate the disease. Others seek its origin in animalculæ floating in, and filling the atmosphere, which by their irritating effects upon the system produce the disease. But were *these* the causes of malignant cholera, we should behold the disease tossed upon the winds with atmospheric capriciousness, from point to point, north to south, west to east, or from all points of the divisions and sub-divisions of the compass. This, however, is not the case, though, indeed, unfortunately, little is yet known of the laws governing atmospheric phenomena, and their variations. We have, it is true, Professor Espy's ingenious theory on several points, and also those of others. We know, from hourly demonstrated proofs, that changes are constantly occurring in the attributes of atmospheric phenomena; heat, cold, expansion, contraction, condensation, irrespective of seasons,



and that these, in an eminent degree, if not altogether, are caused by solar heat, or in other words, solar electricity. It is evident that the earth was not made or created to the atmosphere, but that the atmosphere is part and parcel of this planet, engendered within and exhaled from its body, by solar and thermal electricity, as atmospheres are naturally formed and exhaled from other bodies. Those subtle, sub-terrestrial fluids or gases, are all subject to that most powerful and subtle of the imponderable agents, which we denominate electricity; and is it at all unreasonable or fanciful to suppose, that by its sub-terrestrial action such influences may be often exerted on the crust of the earth as to unfit certain portions of the surface of the globe for the healthful existence, or even continuance of vegetable and animal life? May not various poisonous and destructive gases be eliminated in this way, blighting the hopes of the husbandman, and sending forth pestilence to smite its tens of thousands in noon-day, to confound all the theories and wisdom of chemists and pathologists? Suppose, for illustration, that a superabundance of nitrogen gas were exhaled into the atmosphere. Might we not find in that phenomenon a rational explanation of the excitement in certain nervous temperaments, pains, languor and oppression in others, and the certain effects they produce upon their systems, if of long continuance; whilst others, differently constituted, might exclaim to the "how d'ye do" of their friends, that they "never felt so well in their lives." So with a superabundance of oxygen and other gases, inflammatory or nervous fevers may be produced in peculiar temperaments obnoxious to such influences, as well as hurricanes, thunder storms, and such like phenomena, so beautifully described by Bulwer as affecting the atmosphere and influencing the surrounding population and the brute creation immediately preceding an irruption of Mount Vesuvius. Atmospheres thus locally affected, either by solar attraction, or sub-terrestrial-electric action, could produce only endemic disease, or disease from "miasmatic poisons" of the locality. "Ship fevers," "prison fevers," and such like infections, may be accounted altogether accidental, arising from animal poisons, affecting the immediately adjacent portion of local atmosphere, and not coming within this law. Is there not some warrant for the supposition that as the earth performs its revolutions, it may be subject to aberrations, now subjecting it to a more than usual amount of electric influences, and now to a lesser amount than usual? We may rationally suppose such phenomena to take place, and the influence they would exert upon lunar and terrestrial electricity, affords abundant room for speculation. We have, for example, as an evidence of terrestrial-electric force, the magnetic needle, &c.; and science has discovered four magnetic poles, two of weak and two of strong magnetic power, or electric intensity—the most powerful of the magnetic poles being on the American Continent, and the weakest in Asia—the dip of the magnetic needle exhibiting the intensity. May not such phenomena as are here indicated, produce or be the exciting cause of the internal generation of the gaseous atmospheric agent, steam, which is of great electric intensity, and caloric, so as to account for disruptions of fire through

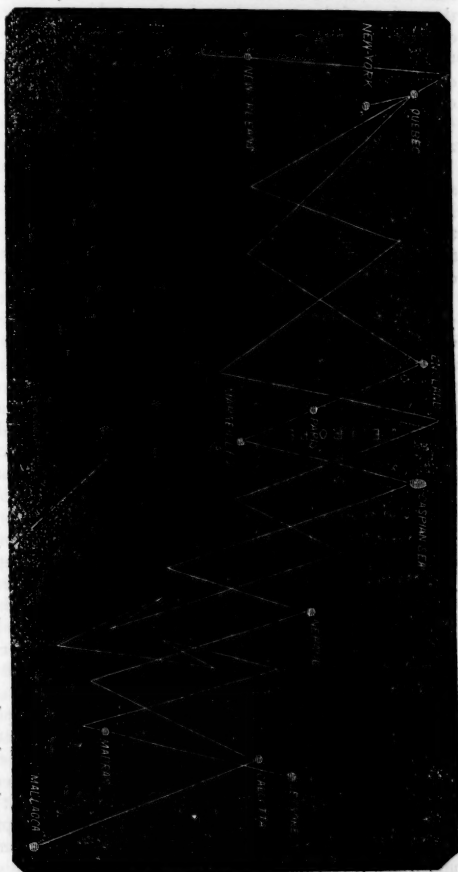
the earth's crust; the up-heaving of mountains and high table lands, and the extraordinary effects of electric action, often bringing about a superpurgation of these fluids to the destruction of portions of the earth's crust, of its usually natural physical appearance, either in the form of volcanic eruptions or by earthquakes, &c. &c. ? Now these phenomena are in all probability superinduced by this sub-terrestro-electric action upon the crust of the earth, influencing and producing such changes in the gaseous and vaporous generations of the earth's crust, which exuding and exhaling an atmosphere of general electric uniformity, but often deviating from this electric uniformity in the eccentric streams peculiar to electric action, and at these indefinite periods producing the various and divers phenomena so inimical to animal and vegetable life.

Let us examine the *course* of the cholera, from each period that it appeared in the east, to the known limits of its western course. It has not been driven about by the caprice of the winds; nor has it emanated from low grounds; nor has it run the *course of rivers*, as asserted, with the exception of those rivers running parallel with the western magnetic pole or electric route, and then generally upon one bank of the river only at the same time. Its course has exhibited all the phenomena of electric eccentricity, but has advanced steadily westward by electric "tacks," similar to the "tacking" of two ships sailing against a head wind, but crossing each other's course. From its point of starting in 1817, from being an endemic disease, it radiated over the Peninsula of which the Delta of the Ganges, &c., forms a part, and striking a south south east stream in direction, reached as far south as *Malacca*, near to the equator. Then, from the centre of its endemic position, its course has been nearly south south east, about 15 to 20° in its southern course, as it were on the *one* "tack," and north north west, about 30°, on the other tack—the "short tack" being from the north north east point to south south west, and by thus crossing the course of each electric track, making its westerly advancing "*line of front*" parallel with the lines of the magnetic poles.

The annexed diagram will render my idea more full and clear. It explains the broad principle only of the theory which I have advanced, from the observations that I have made upon the peculiar approach of this epidemic from the east to the western route, in its various eccentric angles of which the annexed diagram is merely an outline upon an extended scale. Thus, then, these "tacks short tacks," in marine parlance, of the electric fluid, within the crust of the earth, alter and affect the exhalants forming the atmosphere in the routes here shown, rendering them inimical to the healthfulness and vitality of the animal and vegetable kingdoms. I believe it to be, as it were, a solar and terrestrial combat for the balance of power of the electric force, between these and the other bodies of the universe, until the equilibrium, from the natural laws governing them, is brought about and maintained; and that during such a period, *thermo-electricity* is evolved within the body of the earth, and organized bodies must suffer more or less, according to their several peculiarities and organization. Thus,

then, in man, and in several of the inferior races, the blood has in an eminent degree become electric, and the contest is with the nervous power or animal electricity to overcome the non-electric force of the sur-

Jessore and vicinity the starting point of the Asiatic cholera south westward, and north westward towards *Nepaul*. Calcutta the starting point to Malacca, and also similar to that of Jessore, but more westward in its lines. The dotted lines merely illustrate, in a measure, the detail of the electric streams, over so vast a surface, of which the white lines exhibit the grand scale. It will also be perceived that the route of its westward *front*, tends obliquely to the American magnetic pole.



rounding agents. It is immaterial whether the atmosphere be filled with animalculæ or with flying scorpions, it being a well-established fact that venomous reptiles and animalculæ are engendered and thrive in noisome corruptions. The production of locusts, the plagues of the east, the exhalations of the Pontine marshes, arise from these electric causes.

Thus I conceive the "potato rot" may be accounted for from these occult causes, and which, I opine, will yet be proved to have acted as a sort of *inoculating virus*, which has, and will in an eminent degree modify the action of the atmosphere in those places where, I may say, the cholera has existed as a disease in the potato—*i. e.*, decomposing its vital fluids—to such an extent as to change the peculiar character of *Asiatic cholera* into the form of the fatal dysentery which has afflicted our country as an epidemic during the last six months. It is true that it has been exceedingly fatal as a *dysentery*, but, it will be admitted, very mild as a malignant disease.

The "black death" of the fourteenth century commenced in China, and made very closely the same westward route as has the cholera: during which period, making all due allowance for the superstition of the times, and the consequent exaggerations, undoubted testimony informs us that great terrestrial and atmospheric changes, from sub-terrestrial agencies, occurred.

I have thus endeavored to present my views of the phenomena to which the origin of this terrible pestilence is to be traced. Hurried and imperfect as the statement is, I am not without confidence that it merits, at all events, careful examination. Farther investigation will disclose the merits of the theory; and let me now advert to the treatment suggested by it. Is not my view of the *cause* of the disease sustained by the effect which it produces on the human system? Great, and often almost instantaneous and total prostration of the nervous system (many of the followers of the British army in India fell dead, "as if struck by lightning")—paralysis of the whole absorbent system, and the secretories and excretories—the state of the blood—do not all the symptoms, in fact, which mark the progress of the disease, disclose to us the presence and power of some extraordinary disorganizing, decomposing agency, very different from, and infinitely more destructive than, any of those more familiar causes of death, which we studied in our text books when we walked the hospitals or submitted to the lectures of our Gamaliels? I regard the electric state of the animal system, whatever its peculiar modification may be, as being, in this disease, so injuriously affected by the poisonous gases or atmosphere exhaled in consequence of the telluric phenomena which I have attempted to describe, that the blood becomes to a greater or less extent decomposed, and the nervous system is affected just as improperly prepared solutions would act upon a galvanic battery—so producing corresponding changes in, and action of, the nervous system. In the study of the pathology of this disease, so far as it yet extends, one great oversight has evidently been made. The total paralysis of the *absorbents, secretories and excretories*, which is general, and almost the first, and which is indeed the most alarming symptom, and which I believe to be the *immediate* cause of the utter prostration of the entire system, has been overlooked; and classing this disease with the ordinary dysenteric affection, pathologists have conducted their investigations with a pre-conceived opinion as to its nature, and seem to be desirous rather of reconciling the appearances which present themselves to their notice with that

opinion, than of collecting facts, on which to base sound deductions. The skin and its pores relax, and a cold clammy sweat exudes upon the surface of the body. The serum of the blood infiltrates along the whole course of the intestinal canal, and passes off inodorous and without the natural effect. The bile secretes, and fills its receptacle in cases of ordinary duration, and the blood is left in its channels a thick unctuous matter, similar in appearance to the blood squeezed from a leech, when it has been permitted to remain in its body for several days, evidently from the loss of its electric or stimulating properties and of its oxygen. Then we have the sinking of the pulse, the blue stage, asphyxia and death. The indication for the purpose of counteracting the ascendancy of these powers over life, refers more particularly to the second and third stages of this disease. Those wise enough to combat the disease on its first approach, and who have been successful in arresting its fatal career, will of course need no further attention or treatment; but where the first remedies exhibited have failed to arrest the disease, or where the premonitory symptoms have been neglected, and allowed to run into the second stage, I should adopt the principle of clearing at once the *prima via*, with from one to one and a half drops of croton oil and five grains of calomel, using frictions, warm stimulating drinks—sulphuric ether and nitrous ether, equal parts, in warm water, and all the usual appliances in the ordinary dysenteric affections. This treatment failing, I should then proceed to treat the disease in common with the above, as if the premonitory symptoms had been properly treated, but had now run into the second stage. Place the body in a *vapor box*, lined with two extended sheets of metal, after the manner of a galvanic box, placing the patient in a horizontal position, keeping closely covered in, except his face. I would then throw a warm vapor, not exceeding 98 deg. into the box, previously placing in the box a vessel with the proper materials, to generate and let free a portion of oxygen gas. Then pass an electric stream through the body of the patient, the poles being applied to the head and feet, taking care to keep up the temperature equal to that of the blood. The box of course should be placed on non-conductors with regard to its relation with the earth. The internal remedies would be diuretics, and the most nourishing and warm strengthening *astringents*, and such as would most readily yield oxygen. I consider it of the first importance to act upon the kidneys, and bring them to their healthy functions, as well as the skin and the liver, and by all possible means to arrest the evacuations. When the dejections are free from bile, I would recommend to be administered small doses of *bullock's bile* in port wine, on account of its astringent properties, as well as stimulating the absorbents and excretories of the intestines. By these means, I should hope to bring the lacteals and excretories under the nervous influence, thus reproducing vitality to the blood, and by the action of the skin and kidneys attract the evacuations from the excretories of the intestinal canal. This done, very little remains to overcome this dire disease.

Such, sir, are my views of the *cause, nature and treatment* of the Asiatic Cholera.

A. C. CASTLE, M.D.

New York, Oct. 25, 1848.

Surgeon Dentist.

## NITRATE OF POTASSA, IN ASTHMA.

*To the Editor of the Boston Medical and Surgical Journal.*

SIR,—Knowing that the pages of your Journal are open for communications, I would offer, for the benefit of its numerous readers, a few remarks upon the use of Nitrate of Potassa, in the treatment of Spasmodic Asthma. Asthma has been divided, by most writers, into two kinds—viz., nervous or spasmodic asthma, and asthma dependent upon discoverable organic lesions. It is upon the former of these two varieties that I wish to make a few remarks, founded upon personal observation.

Mr. E——, a tradesman of this place, has, for about seven years past, been troubled with repeated paroxysms of asthma, in its most severe form. The paroxysms generally occur suddenly, and after some slight exposure to cold, over-exercise, or the inhalation of impure air, such as that impregnated with dust, smoke, &c.

The appearance of the patient, when laboring under an attack, is very striking. The countenance is as it were blanched, lips livid, extremities cold, pulse small and feeble, and the circulation generally retarded. Upon listening over the region of the lungs during the paroxysm, the sound heard conveys the idea of air being slowly forced through fine net work, at the same time meeting with much resistance. These paroxysms occur, sometimes daily, for a week or more, and then the patient may, by protecting himself from the common exciting causes, be free from them for two or three weeks; but finally they recur with all their accustomed violence. The remedies which at first suggest themselves to the practitioner, are classed under the head of antispasmodics. The most reputed of these have been used in the case under consideration, often at first giving signal relief, but soon losing their power. Next to these, narcotics have been used, but with the same results. Chloroform and ether have been freely inhaled, with no good effect; on the contrary, an aggravation of the paroxysm occurred. The only remedy which the patient can rely upon, is the nitrate of potassa. He has used this very frequently (more than one hundred times) for the last two years, and invariably with immediate relief. The method of using it is as follows. A saturated solution of the nitrate is prepared, and slips of unglazed white paper, nine inches long, and four inches in width, are soaked in this solution for fifteen minutes. These are then folded in a manner to form a piece nine inches long and one inch wide, then dried in an oven, and laid aside for use. Upon the occurrence of a paroxysm, the end of one of these is ignited, and placed in a close room in which the patient is seated. The inhalation of the fumes arising from the burning nitrate affords immediate relief in the most violent paroxysms.

The question may be asked, in what way does the inhalation of these fumes effect this speedy and unequivocal relief? We are informed from the chemist, that 1 lb. of the nitrate of potassa will furnish, when heated to redness, more than 400 pints of oxygen gas. If we are to support the theory of Laennec, viz., that spasmodic asthma is dependent upon an increased necessity of respiration, and consequently of oxygen, is it not

reasonable to suppose, that the air of the room becoming more highly charged with oxygen from the burning nitrate, the paroxysm is thus relieved? These are questions I would propose for further investigation.

H. T. E.

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THE CHILDREN'S INFIRMARY IN BOSTON.

*To the Editor of the Boston Medical and Surgical Journal.*

DEAR SIR.—In a late number of your Journal, you noticed the removal of the Children's Infirmary, with a few commendatory remarks respecting the objects of the Institution. As you considered the object worthy a paragraph at that time, you may perhaps feel disposed to allow a little more space in your Journal, for the purpose of furnishing to your readers a statement of the result of the experiment there instituted. You were also kind enough to attribute to the writer the proprietorship of that establishment, thereby giving him the credit of whatever good it may have been the cause of dispensing; whereas, he in fact only acted as the medical attendant upon its inmates, and as an agent in carrying out the philanthropic objects of others. That institution was commenced as an experiment, and it was believed that our increasing population would always furnish enough of those who are sick and destitute to fill its wards. It was an experiment prompted not by self-interest, but by humanity; and although, from various causes, it did not answer all the ends which were intended, the reasons which led to its establishment still exist, and its benefits, both moral and physical, are felt only by the many who by its agency have been rescued from the deadly hold of the emigrant ship, or the not less filthy abodes of wretchedness now so often seen in this favored city. The obstacles to its success are, singularly enough, not to be found in the diminished resources or lessened zeal of its friends, but rather from the backwardness of the poor to receive its benefits. The difficulty has arisen partly from the prejudices of that class, but perhaps more from the deep-rooted and commendable feeling which prompts the mother to cling to her sick and suffering child, rather than entrust it to those whose motives she has not learned to fathom. This prejudice was constantly seen, and whatever time might have done towards lessening it, the labor and means required were too great to warrant the prosecution of the plan. The apparatus, medicines, &c. have been removed to a more central part of the city, where, for the present, a Dispensary has been established for the same object; but whether it will be continued or not, will depend upon circumstances, and it may be that the public Dispensary which has existed for many years in Boston, will make similar efforts unnecessary.

The Children's Infirmary was in existence eighteen months, and the whole number of patients admitted was 305. The number of beds was 30; the average number occupied, perhaps 15. Died, 22; discharged well, 231; relieved, 25; not relieved, 22; not treated, 4; eloped, 1.

*Ages.*—Fifteen years and under, 192; over fifteen, 113.

The diseases were as follows :

General debility, mostly emig'n'ts,	27	Disease of the heart,	3
Typhoid fever,	116	Pleurisy,	2
Ship fever,	14	Amenorrhœa,	2
Puerperal do.	1	Icterus,	1
Scarlet do.	2	Ascites,	1
Rheumatism,	8	Dyspepsia,	3
Sciatica,	1	Dysentery,	6
Bronchitis,	11	Diarrhœa,	17
Scrofula,	13	Abortion,	1
Hysteria,	4	Prolapsus uteri,	1
Secondary syphilis,	3	Dysmenorrhœa,	1
Erysipelas,	1	Vulvitis,	2
Chorea,	2	Wounds,	12
Cutaneous affections,	6	Fractures,	5
Mania,	1	Tumors,	1
Paralysis,	3	Affections of knee joint,	4
Diseases of the eye,	10	Uncertain,	3
Tonsillitis,	1		
Pneumonia,	4	Total,	305
Phthisis,	11		

Yours, very respectfully,

W. R. L.

#### VEGETABLE ACIDS, AS CORRECTIVES OF ACIDITY OF THE STOMACH AND SOME OTHER DYSPEPTIC AFFECTIONS.

BY STEPHEN TRACY, M.D., WORCESTER, MASS.

[Communicated for the Boston Medical and Surgical Journal.]

THAT the mineral acids are sometimes serviceable in removing acidity of stomach, has long been known. That the vegetable acids are frequently so, has also been testified by several medical writers more recently. But no theory of their *modus operandi* has as yet been presented to the profession, that is at all satisfactory. It has been said by one eminent medical writer, that they seem to act homœopathically; but we are not of that school, and cannot receive such an explanation. Another writer suggests that it is by a gently tonic property that they effect a cure; but we give lemonade and other dilute acids as a febrifuge and antiphlogistic remedy. We cannot, therefore, admit this theory.

Besides these two theories, I am not aware that any has been presented for the consideration of the profession. The writer did, indeed, make an attempt, several years since, to bring before them another and to himself satisfactory theory; but the editor mutilated his article,\* giving

\* In that article I remarked that "I had found vegetable acids uniformly and entirely successful in removing the disposition to attacks of acidity, in persons who, during the interval of such attacks, were free from all such symptoms; and my impression is that in all such cases they can be relied upon with more confidence than any other remedy. In many cases of acidity arising from pregnancy, I have found the sub-acid fruits of great service, while those that were tart could not be borne, and where mineral acids were decidedly injurious." Braithwaite twice did the writer the honor of a favorable notice, but why the half of the article sent was rejected, he has never been able to learn.



only the statement of cases benefited by treatment with *vegetable acids*, and wholly rejecting the theory. The article referred to may be found in the American Journal of Medical Science, April, 1844.

Since 1841, I have continued to prescribe the use of vegetable acids with very satisfactory success. Cases requiring their use are more frequent during the last of winter and in the spring.

I beg leave, therefore, to call the attention of the profession to this mode of relieving their patients from this often distressing complaint; and in order that I may do this the more effectually, I would offer for their consideration my theory of the action of these acids in those cases in which they are found serviceable, for I fancy that they will be much more ready to administer them when able to give the *rationale* of their action, than when obliged either to give an unsatisfactory or evasive answer to inquiries upon this point.

In all those cases of dyspeptic acidity of stomach in which acids are found serviceable, it is believed that the secretions and fluid contents of the stomach are *alkaline*, and not acid as has been supposed. If it be not so, how can the exhibition of acids produce the eructations of gas which they are found to do? The observations of Tieddeman and Gmelin have shown that a dilute acid is indispensable to digestion. Food will not digest in an alkaline fluid. In health the secretions of the upper portions of the alimentary canal, including the stomach, are acid, and those below the pylorus are alkaline. It appears, from the experiments and observations of Beaumont, that any circumstance causing an irritation of the mucous membrane of the alimentary canal tends to remove the point of alkaline secretion upwards, so that those of the whole stomach, or at least all except the cardiac orifice, often become alkaline instead of acid, as is necessary in order to digestion. The irritation caused by pregnancy will often thus affect the secretions of the alimentary canal. The use of alkalies and the *disuse* of fruits also tends to this result. When this is the case with the lower portions of the canal, the secretions of the œsophageal, pharyngeal, buccal and salivary glands are increased in acidity. The salivary glands often pour out an acid that corrodes the teeth.

If, now, while the mucous membrane of the alimentary canal is moderately irritated, food is taken into the stomach, it is not digested (for an alkaline fluid will not digest it), but remains mechanically disturbing it; neither does it excite the peristaltic action necessary for its removal. This is only excited by an alimentary bolus imbued with a dilute acid. Neither is it excited to a reversed action so as to cause eructations and a rejection of its contents; they are not sufficiently irritating for that. The patient says he has a load—a dead weight in his stomach; and he speaks the exact truth—he describes the very thing. Food is there, it is true, but the bland dilute acid necessary to protect the delicate mucous membrane from irritation, and enable it to digest the food and cause it to become aliment to the body, is not there.

If, under these circumstances, a dilute acid be exhibited, digestion and the healthy peristaltic action will at once commence, and he will feel

well, and he is well. But if no acid be taken, nature, in order to remove the difficulty, causes the secretory organs of the alimentary canal situated about and above the cardiac orifice of the stomach, to pour out a strong acid (for they cannot furnish the large quantity of dilute acid needed). This presenting itself for admission into the stomach, is perhaps in part rejected on account of its acrid quality, and perhaps some of the food with it, while another portion of it remains in the stomach, first neutralizes the alkali of the stomach, then renders its contents acid and digestion is effected. The above is the ordinary course of things under a slight attack of dyspeptic acidity of stomach, as it is called. The acid eructations come from the organs situated about and above the cardiac orifice of the stomach, while the contents and secretions of that organ are alkaline.

Dyspeptic headaches are often prevented or cured by the timely use of acids, as are also a variety of ailments of a similar origin.

#### ABORTION, COMPLICATED WITH UTERINE TUMOR.\*

BY D. W. DAVIS, M.D.

[Communicated for the Boston Medical and Surgical Journal.]

On the 5th of January, I was called upon by Mr. C., of Woodstock, who requested me to go to his house, as his wife was taken flowing. On my arrival I was informed that four weeks previous, she was taken flowing, and was delivered of a fœtus of three months. On examination, I found the os uteri dilated, and a tumor presenting as large as the fist. For the first week she had frequent rigors, followed by fever, quick pulse, and great tenderness over the abdomen. At the end of this time, the local discharge had become copious and extremely offensive, and the tumor had evidently lessened in size. From this time she continued, with gradual improvement, and lessening in size of the tumor, up to the thirty-fourth day from confinement, when the whole morbid growth was discharged. She is now gradually improving.

*Locke's Mills, Me., Feb. 10th, 1848.*

#### PUBLIC REPORTS ON THE CHOLERA.

[VARIOUS medical bodies in different countries of Europe and in the United States have had the subject of the prevention and treatment of the cholera brought before them, and have issued "reports," "instructions," "manifestoes," and "notifications," principally intended for the public, but of interest to the profession as showing the opinions entertained by these widely-separated associations of medical men. That of the Board of Consulting Physicians of Boston is now before us, and will

\* The copy of the above case was received near the time of its date, but was accidentally mislaid.—Ed.

be inserted in an early number of the Journal. The Dublin and the Edinburgh Board of Health Reports have also been received—both of which recommend specific remedies more confidently than the other reports we have seen, or than any real knowledge of the disease would seem to warrant. The College of Physicians of London have made a sensible manifesto, and recommend public measures which are perhaps necessary there. An abstract is given below. A General Board of Health has also been established by the British Government, to improve the sanitary condition of the country, and to prevent the approach of epidemics by the adoption of all suitable measures.]

In a district where cholera prevails no appreciable increase of danger is incurred by ministering to persons affected with it, and no safety afforded to the community by the isolation of the sick. The disease has almost invariably been most destructive in the dampest and filthiest parts of the towns, it has visited. A state of debility or exhaustion, however produced, increases the liability to cholera. The committee therefore recommend all persons during its prevalence to live in the manner they have hitherto found most conducive to their health; avoiding intemperance of all kinds. A sufficiency of nourishing food, warm clothing, and speedy change of damp garments, regular and sufficient sleep, and avoidance of excessive fatigue, of long fasting, and of exposure to wet and cold more particularly at night, are important means of promoting or maintaining good health, and thereby afford protection against the cholera. The committee do not recommend that the public should abstain from the moderate use of well-cooked green vegetables, and of ripe or preserved fruits. A certain proportion of these articles of diet, is, with most persons, necessary for the maintenance of health. The committee likewise think it not advisable to prohibit the use of pork, or bacon; or of salted, dried or smoked meat or fish; which have not been proved to exert any direct influence in causing this disease. Nothing promotes the spread of epidemic diseases so much as a want of nourishment; and the poor will necessarily suffer this want, if they are led to abstain from those articles of food on which, from their comparative cheapness, they mainly depend for subsistence. The committee also recommend the establishment of dispensaries in those parts of the town which are remote from the existing medical institutions; and distinct cholera hospitals, which it will require some time to organize, and which they believe will be found to be absolutely necessary, should the epidemic prevail in this metropolis with a severity at all approaching that which it manifested on its first appearance in England. In conclusion, they "urge on the rich, who have comparatively little to fear for themselves, the great duty of generously and actively ministering to the relief of the poor, while the epidemic prevails; bearing in mind that fuel and warm clothing, and sufficient nourishment, are powerful safeguards against the disease."

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 THE BOSTON MEDICAL AND SURGICAL JOURNAL.
 

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 BOSTON, NOVEMBER 29, 1848.
 

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*Preparation for the Cholera.*—A common question addressed to medical men in this part of the country, and particularly in the cities, is, "What are the civil authorities doing to prevent the ingress and extension of the cholera?" An answer could be better given when the disease appears among us. With regard to this matter of "preparation," we think there is much imprudence as well as ignorance abroad. Among a certain class, there is an indescribable enjoyment in being alarmed by one's own anticipations of something horrible. It affords a fruitful topic for conversation, besides giving opportunity to harass and frighten those more ignorant or less excitable than themselves. No truth is more thoroughly understood by medical philosophers, than that fear actually predisposes to disease, under all circumstances; but in a particular manner, in times of epidemics, and during the prevalence of maladies which rather puzzle the profession. If at such periods, the class to which we have alluded exert themselves, on all possible occasions, to increase the amount of public and private concern in regard to the desolating effects of the prevailing sickness, the fact may be considered as established, beyond contradiction, that there will be considerable unnecessary sacrifice of human life before common sense begins to re-act, and the tone of general sentiment flows in the right channel.

These observations are pertinent in respect to cholera. The genuine Asiatic, with an extra quantum of collapses and spasms, might have been raging in Boston months ago, in the glory of triumph, if some sage, foreseeing calamity-makers could have succeeded in raising the fever of fright. Did such exist here, they would exult in turning the palaces in Beacon street into a long row of hospitals, upon the principle of being always prepared for an emergency, and because, in vulgar parlance, "a stitch in time saves nine."

In 1832, fifty thousand dollars were promptly appropriated by the city of Boston, in anticipation of the cholera. Preparations without stint, for the comfort of patients and the immediate relief of the poor, characterized those spirited municipal doings. But the mighty monster passed by without occupying many of the beds, or dealing harshly with the thousands who stood fearfully waiting to break down in a twinkling. Sometimes the query is suggested, what became of all that liberal sum of money?

When the Asiatic cholera fairly shows itself in Boston, there will be found energy, humanity, perseverance and means enough in the city government, and sufficient medical skill in the profession, to meet any emergency. Instead of organizing district boards of health, and fitting up local hospitals, beforehand, it is only necessary to pursue a strict course of street supervision, and, as far as possible, prevent the accumulation of nuisances in lanes, houses and cellars. By looking after these sources of annoyance and seed-beds of disease, the best preparation will be practised for keeping the cholera at bay. If, notwithstanding, it is destined to come among us, the course of prudence is to wait its advent with firmness, and when it arrives act with becoming promptitude, according to the exigencies of the

times. But let each individual keep in mind this essential fact, that fear is a predisposing cause, and therefore let him stand up in the dignity of manhood, against its debilitating influences.

Nothing we have here said is intended to discourage, in the pages of this Journal or elsewhere, a proper scientific discussion of the nature or treatment of the cholera. This is expected of the profession, and they would be neglectful of duty to omit it.

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*By-Laws of the Massachusetts Medical Society.*—A meeting was held on the 4th of October, by the Counsellors of the Massachusetts Medical Society, at which a report was made by the Committee appointed to arrange the by-laws in conformity with the proposed alterations in them. It was re-committed, with instructions to make further needful revisions, and then be distributed to the Counsellors, and there is to be an adjourned meeting of the board on the first Wednesday in December. Dr. Jeffries, of Boston, has given an uncommon share of attention to this matter, with a desire to make peace in all quarters, by dealing justly with all. The scheme he has furnished is admirable, easily understood, and so methodically arranged that it strikes us that it would be quite difficult to get up a long debate in after years upon any article, on account of its obscurity.

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*Perforation of the Skull with an Iron Bolt.*—Newspapers have been circulating the story of a shocking accident which occurred at Cavendish, Vt., where an iron bar, one inch and a quarter in diameter, and nearly 3 feet long, was actually driven through a man's skull, and passed off many rods beyond. Strange as it may appear, the facts, as related, are true. The man is living, and walks about the house. All the particulars of the case are preparing for publication in this Journal, by Dr. Harlow, the attending surgeon, who writes, under date of Nov. 20th, "The notes of my case of injury of the head will be ready in a few days. A sinus under the frontalis muscle is now nearly healed."

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*National Medical Association's Report.*—As stated in last week's Journal, inquiries are often made how copies of the new volume of Transactions can be procured. It appears to us that some better plan should be devised for placing the publication within the reach of the profession, who naturally have a desire to know precisely what business has been transacted. A cheap edition, therefore, placed on sale in all the cities, would be subserving the great interests of the Association. If it is an object to diffuse information, and gain the regard and co-operation of the profession all over the States, they should be furnished with the means of ascertaining the annual doings of the Association. As the matter now stands, it is exceedingly inconvenient, as both the money and the copies ordered out of Philadelphia must be sent by mail or express.

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*The Urinary Secretion in Cholera.*—It will be remembered that Dr. Comstock, in some remarks in this Journal a few weeks since, directed the attention of readers to the non-secretion of urine in cases of cholera, and the consequent indication of diuretics as a remedy. His views are confirmed by those of Mr. Pilcher, of London, as will be seen by the following

extract from the proceedings of a meeting of the London Medical Society, on the 9th of October. His concluding remarks respecting calomel are singularly at variance with the views of most medical men, but harmonized with those of other members present. Several of the members had formerly seen good effects result from the use of cold water.

"Mr. Pilcher said that drainage had a great effect in preventing cholera, and contrasted Birmingham, which was well drained, and escaped easily, with Walsall, which was low, and ill drained, where great numbers perished. He did not consider cholera contagious, it was rather epidemic. He had found opium the best remedy—without depressing or narcotizing the system—but given to arrest purging, and assist the secretion of the kidneys. He had often observed that there was a peculiar expression in the countenance of cholera patients, indicating whether the patient would die or not. There was no pain in severe cases, the nervous system being too much depressed. The saline treatment with oxymuriate of potassa and opium seemed to arrest purging, and restore the secretion of the kidneys. Where urine was secreted, the patient generally did well. Jeremy's specific—a valuable preparation of opium, made with water—was considered a specific in India. He soon gave up giving calomel, as he thought it always injurious."

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*Medical Journalism in London.*—The copyright of the "Medical Times" was sold at auction in London, Oct. 13th, by order of the mortgagees. The work has been published nearly nine years, and has been a rival, though perhaps not a very formidable one, to the long-established but still sharp-pointed "Lancet." The two works have been at bitter variance. Mr. Wakley, of the Lancet, has several times prosecuted his adversary for libel, and has been successful in the cases—though one action is still pending—nearly £1000 having been paid in costs and damages. It is amusing to us at a distance to perceive the influence which hostile feelings had upon Mr. Wakley's judgment. On the day of the sale, he says in the Lancet, "A breaking up and insolvency could be the only termination of such an imbecile adventure." "What is called the 'copyright' of the thing will be offered for sale; we do not say it will be sold. We can undertake most positively to assert that we would not be encumbered with such a copyright if it were offered to us as a gift." Yet "the thing" was sold, and for the handsome sum of £1710—the clear income from the work being stated at the auction to be £1000 per annum. It was purchased, too, by a firm of well-known printers, who are since well spoken of by the Lancet, and who would not be likely greatly to over-estimate the pecuniary value of the work. It was shown at the auction, however, as is asserted by the Lancet, that the circulation of the Times, instead of being, as represented by the latter, greater than that of any other medical periodical, has been much less than that of the Lancet—which deception, the latter says, exonerates advertisers from any payment for advertisements thus fraudulently obtained.

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*Progress of Cholera in Great Britain.*—By the steamer from Liverpool on Saturday last, we learn that there has been some increase in the number of cases of cholera, both in England and Scotland, since the previous arrival. In London and its vicinity, the deaths reported the pre-

vious week were 65; the number of new cases, daily, 10 or 12. The general health, however, is now 39 below the weekly average of the last five years. On the former appearance of the disease in London, in 1831, the total mortality diminished for the first few weeks, then was raised to its average, and during the height of the cholera was doubled. In the provinces the disease makes some progress, but the cases are few in number. In Edinburgh and vicinity it is committing greater ravages—the number of cases, to the 8th inst., being 468, and the deaths 243. On the 7th, 49 new cases were reported, and on the 8th, 27. The great manufacturing towns have as yet escaped, but it is said to have appeared on the northern coast of France.

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*Vallet's Pills of Carbonate of Iron.*—Every apothecary is aware that however consistent the mass pill, ferri carb., of the U. S. P., may be at the time it is made into pills, its deliquescent nature soon causes them to attract sufficient moisture to soften and run together in damp weather. We have found it very convenient to prepare a quantity of the officinal pills in the following manner, viz.: we take a plate of tinned iron, place on it as much of the mass as is sufficient for two or three hundred pills, and hold it at such a distance above a lamp or other source of heat as is sufficient to cause evaporation, whilst the mass is constantly kept in motion with a spatula, observing that no carbonic acid is evolved by too great a temperature. As soon as a small portion of the mass will splinter after cooling, when crushed, the plate is removed and the hot mass made up rapidly into pills of three grains each, which are kept closely stopped in a bottle. When more than a dozen of these pills are dispensed in a prescription, they should be enclosed in a wide-mouthed vial which prevents all chance of deliquescence.—*Amer. Jour. of Pharmacy.*

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*Delegates to American Medical Association.*—The Medical Society of Oneida County, N. Y., has appointed Drs. Coventry, McCabe, Dering, Goodsell and Babcock, delegates to the Association at its meeting in Boston, in May next.—*Med. News and Library.*

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TO CORRESPONDENTS.—Dr. Thayer's paper on Asiatic Cholera, and Dr. F. H. P.'s concluding notice of Dr. Fitch's book on Consumption, have been received.

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MARRIED.—At Washington, D. C., J. F. May, M.D., to Miss S. M. Mills.—At East Windsor Hill, Conn., Wm. Wood, M.D., to Miss M. L. Ellsworth.

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DIED.—At Brookfield, Conn., Dr. Philo Merwin, 85.—At Columbus, Ohio, Dr. P. Sisson, 57.—At Circleville, Ohio, Marcus Brown, M.D., 23.

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*Report of Deaths in Boston*—for the week ending Nov. 25th, 66.—Males, 35—females, 31.—Stillborn, 2. Of consumption, 9—typhus fever, 4—scarlet fever, 7—lung fever, 5—disease of the heart, 2—infantile, 3—teething, 1—convulsions, 4—croup, 3—marasmus, 3—murdered, 1—paralysis, 1—dropsy, 2—dropsy on the brain, 2—inflammation of the lungs, 3—apoplexy, 1—hooping cough, 1—throat distemper, 2—old age, 1—accidental, 4—smallpox, 2—disease of the bowels, 1—cancer, 1—dysentery, 1—cramp in the stomach, 1—bronchitis, 1.

Under 5 years, 28—between 5 and 20 years, 10—between 20 and 40 years, 11—between 40 and 60 years, 11—over 60 years, 6.

*Medical Miscellany.*—Mr. Clency, of Germantown, Ohio, at the age of 105, voted at the polls for President. Moses Stickney, of Jaffrey, N. H., aged 97, walked two miles and a half to the polls, for the same purpose. This is spirited longevity.—Cases of yellow fever continue to occur at Vicksburg. Oct 26th, there were two deaths by it, and two more on the 28th.—The population of England is represented to be increasing at the rate of one thousand persons daily; and it is shown by official returns, that sixty-five thousand paupers are annually added to the mass of paupers already supported by a tax on the people.—William Adams, an old soldier, died at Washington, Penn., at the age of 100 years.—On good medical authority, it is stated that all diseases arising from drinking spirituous or fermented liquors are liable to become hereditary, and gradually to increase until, if the cause be continued, the family becomes extinct.—At Weston, Missouri, a new botanical Journal is to be published, advocating a miscalled medical reform.—A certain Dr. Newton, out west, has produced a pamphlet, in which the idea is advanced that cancer is caused by *entozoa*.—In 1847, the number of bushels of Indian Corn used for distilling spirits was 25,000,000; Rye, used for the same purpose, 10,000,000 bushels; total, 35,000,000! The quantity of potatoes manufactured into whiskey is not stated.—Dr. Hoyt, city physician of Syracuse, is laboring with praiseworthy earnestness to induce the people to erect a public hospital in that city.—That iniquitous business of prosecuting surgeons for malpractice, has re-commenced in the north-easterly part of Vermont.

#### SURGICAL INSTRUMENTS.

J. W. PHELPS would announce to the medical profession, that, during his late tour in Europe, he secured the agency for the sale of Weiss and Son's (London) celebrated Surgical Instruments, and since his return has received an invoice comprising Amputating, Trepanning and Obstetrical Instruments of new patterns. Segala's Speculum Vagine, Jordan's Ear Lamp, Reservoir Syringes with metallic pistons, Pocket Cases, &c. These Instruments are known to the profession as the best in use, and are supplied by this London house to nearly all the Hospitals and eminent surgeons of Europe. From the same house the subscriber will be supplied with all new inventions and improvements in the art, as they appear from time to time in Europe. The above articles, with many not enumerated, together with a full assortment of his own Patent Convex Spiral Trusses and Abdominal Supporters, may be found at 176 Tremont St., opposite Tremont House, Boston. Oc25—6m

#### TO SURGEONS.—ETHEREAL SOLUTION OF GUN COTTON

The properties of this solution as applied to Surgery, by Mr. S. L. Bigelow, are as follows. It almost instantly forms an unirritating coating or plaster of great strength and durability. In contracting, it brings the edges of the wound very firmly together, and being impervious to air and water, enables them to unite rapidly by first intention. It leaves hardly a perceptible scar. No sutures are required for simple incised wounds of any length. It affords protection for all excoriated surfaces, &c. mh22—tf For sale by JOSEPH BURNETT, 33 Tremont Row.

#### OBSTETRICAL INSTRUMENTS.

Of the latest and most approved patterns, in cases, or singly. The cases include *Forceps, Vectes, Performing Scissors, Blunt Hook and Crotchet, Bedford's Guard, Placenta Forceps, &c.*

Also, a full assortment of *Amputating, Trephining, Autopsy, Dissecting, Dressing, Eye, Tonsil*, and all other Instruments used by Surgeons. For sale on favorable terms by JOSEPH BURNETT, May 17—tf No. 33 Tremont Row

#### DR. SKINNER'S CLARIFIED COD-LIVER OIL.

THE purest article of *Cod-Liver Oil* is put up by Dr. Skinner, at his office, 60 1-2 Cornhill, (up stairs), and offered to the profession, to druggists and to the public generally. Price, 37 1-2 cents for small bottles; 75 cents for large do. A printed pamphlet of medical authorities, certificates, directions for using the oil, &c., accompanies each bottle. The profession and druggists supplied at the usual discount.

May 31—tf

H. B. SKINNER, M.D.  
Office, 60 1-2 Cornhill (up stairs)

#### FRESH AND GENUINE DRUGS AND MEDICINES

Of superior quality, carefully prepared for Physicians' use, and for sale on the most favorable terms at 33 Tremont Row, Boston, by JOSEPH BURNETT, Feb. 10—tf (Successor to T. Metcalf.)

#### RESPIRATORS.

THE subscriber has a few English Respirators, that he will sell at cost. N15—eopl m

H. I. BOWDITCH.

#### TO PHYSICIANS.

A YOUNG physician now practising in New York City, wishes to associate himself with an elderly and well-established practitioner, in some growing country village in the vicinity of Boston, Ms. The advertiser has been five years in practice, during which time he has been connected with some of the first hospitals in the country. After a time he would purchase the senior physician's real estate, if he wished to dispose of it, at a fair valuation. For particulars, inquire at this office. Sep. 20—eoptf.

#### VACCINE VIRUS.

PHYSICIANS in any section of the United States, can procure ten quills charged with PURE VACCINE VIRUS by return of mail, on addressing the Editor of the Boston Medical and Surgical Journal, enclosing one dollar, *post paid*, without which no letter will be taken from the office. Feb. 6.